

N.C. PRAMS FACT SHEET

June 2005



Barriers to Prenatal Care

2003 N.C. Pregnancy Risk Assessment Monitoring System (PRAMS)

→ The objective of prenatal care is to monitor and improve the health of the pregnant mother and her baby.

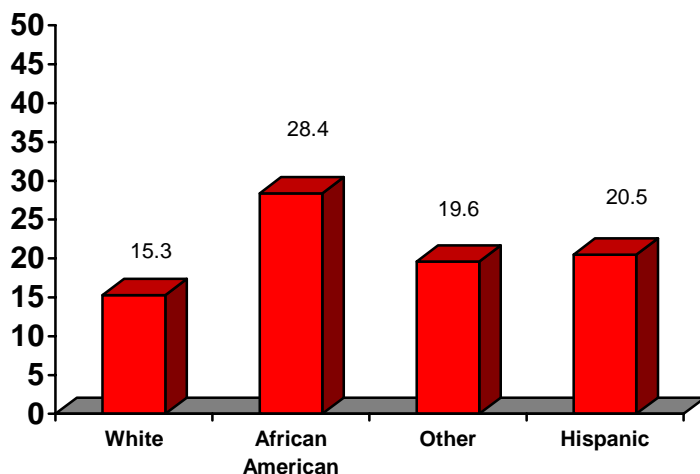
→ Getting early and regular prenatal care is crucial because it allows the health care provider the chance to find problems early so they can be treated as soon as possible. According to the Centers for Disease Control and Prevention, nearly one-third of American women who give birth every year will have some kind of pregnancy-related complication. Those who do not get adequate prenatal care run the risk that such complications will go undetected or will not be identified soon enough. This can lead to potentially serious consequences for both the mother and her baby.

→ During prenatal visits, the health care provider teaches the woman about pregnancy, monitors any medical conditions she may have, tests for health problems with the mother and baby, and refers the woman to needed services such as a support group, childbirth class, or the WIC program.

→ The percentage of women who reported that their first prenatal care visit occurred during the first trimester has remained relatively stable from a low of 74.8 percent in 1997 to a high of 80.8 percent in 2001.

→ This is still below the Healthy People 2010 target of 90 percent of women beginning prenatal care during the first trimester.

Percentage of women reporting a barrier to prenatal care, by race/ethnicity: N.C. PRAMS, 2003



– Overall, 18.4 percent of mothers reported a barrier to obtaining prenatal care.

– African American mothers (28.4%) were significantly more likely to report a barrier than white mothers (15.3%). Hispanic mothers were also more likely to report barriers to obtaining prenatal care (20.5%), compared to whites.